



NEW JERSEY ARMY NATIONAL GUARD
JOINT FORCE HEADQUARTERS
3650 SAYLORS POND ROAD
FORT DIX, NEW JERSEY 08640-5606

ARMY BULLETIN NO. 8

28 February 2008

**Trainee, Transient, Holdee (Medical) and Student Company (TTHS)
Operating Procedures**

1. References.

- a. AR 40-501, Standards of Medical Fitness, 14 December 2007
- b. AR 40-400, Patient Administration, 13 October 2006
- c. AR 135-91, Service Obligations, Methods of Fulfillment, Participation Requirements, and Enforcement Procedures, 1 February 2005
- d. AR 135-175, Separation of Officers, 28 February 1987
- e. AR 135-178, Enlisted Administrative Separations, 13 March 2007
- f. AR 135-381, Incapacitation of Reserve Component Soldiers, 27 December 2006
- g. AR 600-8-4, Line of Duty Policy, Procedures and Investigations, 14 April 2004
- h. AR 635-40, Physical Evaluation for Retention, Retirement, or Separation, 8 February 2006
- i. AR 735-5, Policies and Procedures for Property Accountability, 28 February 2005
- j. NGR 600-200, Army National Guard Enlisted Personnel Management Implementing Draft, 27 September 2006
- k. NJARNG Financial Liability Investigation of Property Loss (FLIPL) Standing Operating Procedure, 7 May 2007

2. Purpose. The TTHS is a Joint Force Headquarters element that provides centralized management of non-qualified / non-deployable Soldiers with medical issues. This bulletin outlines procedures to attach or release from attachment a Soldier to the TTHS.

3. Goal. The end state of this program is unit readiness. The goal of the TTHS is to transition Soldiers back to their unit as quickly as possible. The TTHS will complete the NJDOD Form 25 to separate the Soldier in the event that the medical issue cannot be resolved.

4. Applicability. This bulletin applies to all New Jersey Army National Guard (NJARNG) Soldiers. The contents of this bulletin are directive in nature.

5. Health Insurance Portability and Accountability Act (HIPAA). HIPAA provides protection of confidentiality and security of health data through setting and enforcing standards. Leaders must safeguard privacy and confidentiality of Soldiers' medical information and conditions.

6. Criteria for Attachment.

a. Soldier fails a Periodic Health Assessment (PHA). Soldier must clear up medical condition with their civilian health care provider(s) and provide New Jersey Army National Guard (NJARNG) Medical Command (MEDCOM) with documentation of corrective action on their condition.

b. Soldier reports to MEDCOM facility to request a physical profile and is found unfit for duty pending further medical evaluation.

c. Soldier is injured or becomes ill in the Line of Duty (LOD) and is found unfit to perform duties or is placed on Incapacitation (INCAP) status and is receiving INCAP pay for more than three months.

d. Soldier fails a Soldier Readiness Processing (SRP) exercise for deployment, or fails to progress through a Soldier Readiness Screening (SRC) at a mobilization site, and is immediately returned from Active Duty (REFRAD). Soldiers can also be found medically unfit upon return from Title 10 deployment during reverse SRC.

e. Soldier is identified during a Mobilization SRP to be in a Red status; meaning that their medical condition is permanent and the Soldier is unfit for duty. This Soldier will immediately report to the next TTHS drill and be classified as a walk-in. This Soldier will be directed to report to the TTHS by MEDCOM Commander only. This action is the exception to the procedures outlined in this bulletin.

7. Time Lines. Soldiers are given ample time to clear up their medical issues with MEDCOM before attachment to the TTHS. The following timelines are used:

a. 30 Days. Soldier remains in unit of assignment. Soldier reports to MEDCOM and a medical problem is identified. Soldier is given a medical reference form to have their Primary Care Physician and/or Specialist complete and return to the MEDCOM within 30 days.

b. 60-90 Days. Soldier remains in unit of assignment. The Soldier's medical file is forwarded to the G1 Health Services Section (HSS) Case Manager after 30 days. The Case Manager sends the Soldier a Letter of Instruction (LOI) outlining the Soldier's medical disqualification. If the Soldier fails to clear up the medical issue by not providing documentation from his Primary Care Physician or Specialist, by the suspense date of the LOI, the Soldier will be attached to the TTHS.

c. 91st Day. The Soldier is attached to the TTHS. The Soldier did not provide appropriate medical documentation to clear their medical issue. The Soldier is attached to the TTHS until the medical condition is resolved, returned to duty or the Soldier is medically discharged.

8. Government Property. Soldiers must clear property with their parent unit before they report to the TTHS. Soldiers attached to the TTHS will provide the TTHS Senior Personnel Sergeant a signed copy of their cleared Organizational Clothing and Equipment Issue Report. The Commander of the Soldier's parent unit remains accountable for the attached Soldier's property until all property is turned-in. The parent unit is responsible to initiate property accountability procedures in accordance with (IAW) property accountability regulations to include Letter of Demand, FLIPLs, and supporting documentation.

9. AWOL Soldiers. Soldiers who are AWOL from TTHS drill will be discharged IAW AR 135-91, AR 135-178 and NGR 600-200. The Discharge Order will annotate the appropriate discharge code. The Soldier's MEDPRO file will be annotated with the status of the Soldier's current medical profile.

10. **Suspended Actions.** Soldiers can not attend military schools, be placed on ADSW or AT orders, or be promoted during attachment to the TTHS.

11. **Discharge.** Medically unfit Soldiers with 15 years of credible service are eligible for retirement. They will receive a 15 Year Letter and placed into the Retired Reserves. All other Medical Discharges will be in accordance with applicable regulations.

12. **Enlisted Promotion System (EPS).** All Soldiers are eligible for EPS processing regardless of their medical status. The parent unit is responsible for processing 4100s on Soldiers attached to the TTHS. However, they will not be promotable until cleared from the TTHS.

13. **Evaluation Reports.** OERs and NCOERs are the responsibility of the Soldier's parent unit. Soldiers who remain in the TTHS for more than 90 days will receive an NGB Form 25 for non-rated time if required.

14. **ETS Extensions.** Soldiers attached to the TTHS will be extended for six month periods as needed to complete their medical board proceedings.

15. **Title 10 Medical Hold.** Title 10 Soldiers remain in their NJARNG parent unit. The parent unit tracks the Soldier's progress and keeps in contact with the individual providing support as necessary. Soldier's released from Title 10 report back to NJARNG G3-MR for reconstitution and return to their unit. If a Soldier was found medically unfit by PEB proceedings while on Title 10, the Soldier reports back to G3-MR for reconstitution and then they will be transferred to the TTHS for discharge.

16. The TTHS unit phone number is (609)562-0696.

OFFICIAL:

A handwritten signature in dark ink, appearing to read 'J. Grant', with a long horizontal line extending to the right.

JAMES J. GRANT
COL, GS, NJARNG
Chief of Staff

GLENN K. RIETH
Major General, NJARNG
The Adjutant General

DISTRIBUTION: J